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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Rosita	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Saez	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7462	

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Debtor 1 Rosita Saez

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live	151 Betsy Ross Way	If Debtor 2 lives at a different address:				
		Woodbury, NJ 08096 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
			Number, Street, City, State & ZIP Code				
		Gloucester County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6. Why you are choosing this district to file for bankruptcy		Check one:	Check one:				
		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Case number (if known) Debtor 1 Rosita Saez

Par	t 2: Tell the Court About	Your E	3ankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice</i> fpage 1 and check t		r 11 U.S.C. § 342(b) for Individuals Filing for Bankr te box.	ruptcy	
	choosing to file under	☐ Chapter 7							
			Chapter 11						
			Chapter 12						
		■ c	Chapter 13						
3.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.							
					tallments. If you chost (Official Form 103)		on, sign and attach the Application for Individuals	to Pay	
			I request tha	t my fee be wa	nived (You may requ	est this optio	on only if you are filing for Chapter 7. By law, a jud		
			applies to you	our income is less than 150% of the official poverty in installments). If you choose this option, you must cial Form 103B) and file it with your petition.					
).	Have you filed for bankruptcy within the last 8 years?	■ N							
	iast o years :	□ Y	es. District		Who	an	Case number		
			District		Who		0		
			District		Who		Case number		
10.	Are any bankruptcy cases pending or being	■ N	0						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.						
			Debtor				Relationship to you		
			District		Who	en	Case number, if known		
			Debtor				Relationship to you		
			District		Who	en	Case number, if known		
11.	Do you rent your residence?	■ N	o. Go to li	ine 12.					
		□ Y	es. Has yo	ur landlord obta	ained an eviction jud	lgment agains	st you and do you want to stay in your residence?		
				No. Go to line	12.				
				Yes. Fill out <i>In</i> bankruptcy per		ıt an Eviction	Judgment Against You (Form 101A) and file it with	h this	

Document Page 4 of 61 Case number (if known) Debtor 1 Rosita Saez Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs

immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs

urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Rosita Saez

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Rosita Saez		Docui	Case numb	Der (if known)			
Part	6: Answer These Que	stions for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.	Fa. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.		y business debts? Business debts are debt investment or through the operation of the bu				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts yo	ou owe that are not consumer debts or busine	ess debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chap	oter 7. Go to line 18.				
	Do you estimate that after any exempt	☐ Yes.		7. Do you estimate that after any exempt pro	operty is excluded and administrative expenses s?			
	property is excluded and administrative expenses		□ No					
	are paid that funds will be available for		□ Yes					
	distribution to unsecure creditors?	d	_ 100					
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	☐ 25,001-50,000			
	you estimate that you	■ 1-49 □ 50-99		☐ 5001-10,000	□ 50,001-100,000			
	owe?	☐ 100-19	99	□ 10,001-25,000	☐ More than100,000			
		□ 200-99	99					
19.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion			
			001 - \$500,000	□ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion			
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$0 - \$5	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100.000.001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
		□ \$500,0	001 - \$1 million	□ \$100,000,001 - \$500 million	Li More triari \$50 billiori			
Part	7: Sign Below							
For	you	I have exa	amined this petition, and I	declare under penalty of perjury that the info	rmation provided is true and correct.			
				er 7, I am aware that I may proceed, if eligible ne relief available under each chapter, and I o				
				did not pay or agree to pay someone who is rd the notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this			
		I request	relief in accordance with th	ne chapter of title 11, United States Code, sp	ecified in this petition.			
		bankrupto and 3571	ey case can result in fines of	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,				
		/s/ Rosita S		Signature of Debt	tor 2			
			of Debtor 1	Signature of Debi	LVI Z			
		Executed	on June 9, 2016	Executed on				
			MM / DD / YYYY	M	M / DD / YYYY			

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Debtor 1 Rosita Saez Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ John Amenhauser, Esquire	Date	June 9, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
John Amenhauser, Esquire		
Law Offices of Seymour Wasserstrum Firm name		
205 W Landis Ave. Vineland, NJ 08360		
Number, Street, City, State & ZIP Code		
Contact phone 856-696-8300	Email address	mylawyer7@aol.com
121372014 New Jersey		
Bar number & State		

Certificate Number: 12459-NJ-CC-027528562



CERTIFICATE OF COUNSELING

I CERTIFY that on May 31, 2016, at 2:25 o'clock PM PDT, Rosita Saez received from Abacus Credit Counseling, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of New Jersey, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: May 31, 2016 By: /s/Amanda Alumbaugh

Name: Amanda Alumbaugh

Title: Credit Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

		DOGUITIEIII	Lune a ni ni	
Fill in this infor	mation to identify your	case:		
Debtor 1	Rosita Saez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number				
(if known)				Check if this is amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	247,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,675.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	262,675.00
Par	t 2: Summarize Your Liabilities		
			abilities at you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	241,683.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	37,258.26
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	42,723.00
	Your total liabilities	\$	321,664.26
⊃aı	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,221.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,375.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other scl	hedules.
	■ Yes		

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

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Debtor 1 Rosita Saez

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 10,677.70 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	37,258.26
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	37,258.26

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-#III	in this informa	tion to identify	your case and th		ument	Page 11 of 61					
ГШ	III UIIS IIIIOIIIIa	ition to identify	your case and th	iis iiiiiig) -						
Deb	otor 1	Rosita Saez First Name	NA: alalla	Name		Last Name					
Deb	otor 2	riist Name	Middle	e iname		Last Name					
	use, if filing)	First Name	Middle	Name		Last Name					
Llni	ted States Bank	ruptcy Court for	the: DISTRICT	OF NEV	VJERSEY						
Oili	ica Glaics Barik	ruptcy Court for	uic. <u>Biotitio</u>	01 1121	VOLICET						
Cas	se number									Check if this is an	
										amended filing	
∩f	ficial Form	m 106A/B	\								
			_								
<u> </u>	<u>:neaule</u>	A/B: Pr	operty							12/15	
						f an asset fits in more than on					
nfor	mation. If more s	pace is needed,				ole are filing together, both ar the top of any additional page					
Ansv	ver every question	on.									
Part	1: Describe Ea	ch Residence, B	uilding, Land, or Ot	her Real	Estate You C	Own or Have an Interest In					
). D	o you own or nav	e any legal or eq	uitable interest in a	ıny resia	ence, bullain	g, land, or similar property?					
	No. Go to Part 2	-									
	Yes. Where is the	ne property?									
1.1				What	is the proper	rty? Check all that apply					
	151 Betsy R	oss Way		_	Single-family		Do not ded	uct secured cl	aime i	or exemptions. Put	
	Street address, if a	vailable, or other des	cription	_		ulti-unit building	the amoun	ms on <i>Schedule D:</i>			
					-	m or cooperative	Creditors V	Vho Have Clai	ho Have Claims Secured by Property.		
					Manufacture	ed or mobile home	Current va	lue of the	Cı	rrent value of the	
	Woodbury	NJ	08096-0000		Land		entire pro			rtion you own?	
	City	State	ZIP Code		Investment p	property	\$24	17,000.00	_	\$247,000.00	
					Timeshare		Describe t	he nature of v	our o	ownership interest	
					Other		(such as fe	ee simple, ten		by the entireties, or	
			Who		st in the property? Check one	a life estat	e), if known.				
				_	Debtor 1 onl	•					
	Gloucester				Debtor 2 onl	*					
	County				Debtor 1 and	d Debtor 2 only	☐ Checl	c if this is con	nmun	ity property	
					At least one	of the debtors and another		structions)			
						you wish to add about this ite	em, such as lo	cal			

Official Form 106A/B Schedule A/B: Property page 1

Case 16-21224-JNP Doc 1 Filed 06/09/16 Entered 06/09/16 09:50:37 Desc Main Document Page 12 of 61 Case number (if known) Debtor 1 Rosita Saez If you own or have more than one, list here: 1.2 What is the property? Check all that apply Westgate resorts ☐ Single-family home Do not deduct secured claims or exemptions. Put 2801 Old Winter Garden Rd the amount of any secured claims on Schedule D: ■ Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Street address, if available, or other description Condominium or cooperative ■ Manufactured or mobile home Current value of the Current value of the Ocoee FL 34761-0000 ■ Land entire property? portion you own? City State ■ Investment property Unknown Unknown ZIP Code Timeshare Describe the nature of your ownership interest ☐ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Debtor 1 only **Orange** ☐ Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: Debtor is surrendering any interest in the property 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$247,000.00 pages you have attached for Part 1. Write that number here.....=> Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Jeep 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Grand Cherokee** Model Debtor 1 only Creditors Who Have Claims Secured by Property. 2006 Year: Debtor 2 only Current value of the Current value of the 125000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another Owned outright. Vehicle does \$2,000.00 \$2,000.00 not run. ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories □ No

(see instructions)

Yes

Kawasaki Who has an interest in the property? Check one 4.1 Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: **KLX250** Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Year: 2013 Debtor 2 only Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Sons Motorcycle. He pays and \$2,675.00 \$2,675.00 ☐ Check if this is community property

Official Form 106A/B

maintains vehicle.

Case 16-21224-JNP Doc 1 Filed 06/09/16 Entered 06/09/16 09:50:37 Document Page 13 of 61 Case number (if known) Debtor 1 Rosita Saez 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$4.675.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$5,000.00 Household goods 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$2,000.00 Electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... Clothing \$2,000.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$400.00 Jewelry

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

☐ Yes. Describe.....

De	ebtor 1	Rosita Saez	Do	ocument Page 14 of 61 Case number (if known)	
	■ No	-		ot already list, including any health aids you did not list	
	☐ Yes.	Give specific inform	nation		
15				t 3, including any entries for pages you have attached	\$9,400.00
	2/ 5				
		scribe Your Financial vn or have anv lega	Assets Il or equitable interest in a	ny of the following?	Current value of the
	•	, 0	·		portion you own? Do not deduct secured claims or exemptions.
16.	■ No		e in your wallet, in your hom	e, in a safe deposit box, and on hand when you file your petiti	on
17.				nts; certificates of deposit; shares in credit unions, brokerage vith the same institution, list each.	houses, and other similar
	□ No ■ Yes		·	Institution name:	
			17.1.	Wells Fargo Checking Account	\$400.00
			17.2.	Wells Fargo Savings Account	\$1,200.00
18.	Examp ■ No	oles: Bond funds, inv	oublicly traded stocks restment accounts with broke	erage firms, money market accounts	
19.	Non-pu	•		ated and unincorporated businesses, including an interes	st in an LLC, partnership, and
	Joint v ■ No	enture			
		Give specific inform	nation about them Name of entity:	 % of ownership:	
20.	Negoti Non-ne	<i>iable instrument</i> s inc	lude personal checks, cashi	able and non-negotiable instruments ers' checks, promissory notes, and money orders. sfer to someone by signing or delivering them.	
	■ No □ Yes.	Give specific inform	ation about them Issuer name:		
21.		ment or pension acoles: Interests in IRA		3(b), thrift savings accounts, or other pension or profit-sharing	plans
	Yes.	List each account se	eparately. Type of account:	Institution name:	
				Pension through Wells Fargo	\$0.00
22.	Your s		eposits you have made so the	nat you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications compar	nies, or others
	■ No □ Yes			Institution name or individual:	

Case 16-21224-JNP Doc 1 Filed 06/09/16 Entered 06/09/16 09:50:37 Document Page 15 of 61 Case number (if known) Debtor 1 Rosita Saez 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: Term Life Insurance with employer \$0.00

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

☐ Yes. Give specific information...

Debtor	Case 16-21224-JNP Doc	1 Filed 06/09 Document	/16 Entered 06/09/16 09:5 Page 16 of 61 Case number (if kn	
Debioi	ROSILA SAEZ			
	aims against third parties, whether or not camples: Accidents, employment disputes, in			
	res. Describe each claim			
34. Oth	her contingent and unliquidated claims o	f every nature, includi	ng counterclaims of the debtor and righ	nts to set off claims
I	•			
	es. Describe each claim			
35. An	y financial assets you did not already lis	t		
I				
	Yes. Give specific information			
26 A	dd the dellar value of all of your entries	irom Port 4 including	any antrios for pages you have attached	
	dd the dollar value of all of your entries for Part 4. Write that number here			\$1,600.00
Part 5:	Describe Any Business-Related Property Yo	u Own or Have an Interes	t In. List any real estate in Part 1.	
37. Do y	you own or have any legal or equitable interes	t in any business-related	property?	
	o. Go to Part 6.	•		
□Y€	es. Go to line 38.			
Don't Co	Bosseite American and Commercial Sinking	- Dalatad Bassatu Vass O	and the control of the control	
Part 6:	Describe Any Farm- and Commercial Fishing If you own or have an interest in farmland, list it		wn or Have an Interest In.	
40 Do	ven en er bene en legel er enniteble i	ntaraat in any farm a	commercial fishing valeted presents?	
	you own or have any legal or equitable i No. Go to Part 7.	nterest in any tarm- of	commercial fishing-related property?	
_	Yes. Go to line 47.			
Ц	res. Go to line 47.			
Part 7:	Describe All Property You Own or Have	an Interest in That You F	aid Not List Abovo	
rait 1.	Describe All Property Fou Own of Have	an interest in mat rou b	NU NOT LIST ADOVE	
	you have other property of any kind you			
Ex ■ N	xamples: Season tickets, country club memb	persnip		
	vo Yes. Give specific information			
	res. Give specific information			
54. A	add the dollar value of all of your entries t	rom Part 7. Write that	number here	\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P	art 1: Total real estate, line 2			\$247,000.00
	art 1: Total real estate, line 2		\$4,675.00	\$24 <i>1</i> ,000.00
	art 2: Total vernices, line 5	 s. line 15	\$9,400.00	
	art 4: Total financial assets, line 36	_	\$1,600.00	
	eart 5: Total business-related property, lir	ne 45	\$0.00	
	art 6: Total farm- and fishing-related pro	_	\$0.00	
	eart 7: Total other property not listed, line	-	\$0.00	

Official Form 106A/B Schedule A/B: Property page 6

\$15,675.00

Copy personal property total

62. **Total personal property.** Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$15,675.00

\$262,675.00

Fill in this infor				
Debtor 1	Rosita Saez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number				
(if known)				Check if this is a amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)										
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.						
	151 Betsy Ross Way Woodbury, NJ 08096 Gloucester County	\$247,000.00		\$8,742.00	11 U.S.C. § 522(d)(1)					
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	2006 Jeep Grand Cherokee 125000 miles	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(2)					
	Owned outright. Vehicle does not run. Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit						
	Household goods Line from Schedule A/B: 6.1	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(3)					
	Ellie Holli Genedale PAB. G.1			100% of fair market value, up to any applicable statutory limit						
	Electronics Line from Schedule A/B: 7.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(2)					
	Elle Holli Genedale AVB. TT			100% of fair market value, up to any applicable statutory limit						
	Clothing Line from Schedule A/B: 11.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)					
	Line from <i>Schedule PVD</i> . 11.1			100% of fair market value, up to any applicable statutory limit						

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Case number (if known)

	Noona Jacz			0400 114111201 (11 14101111)	
	description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Jew	elry from <i>Schedule A/B</i> : 12.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(4)
LINE	IIOIII Scriedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
	Is Fargo Checking Account	\$400.00		\$400.00	11 U.S.C. § 522(d)(5)
LIIIG	Holli Schedule A.B. 11.1			100% of fair market value, up to any applicable statutory limit	
	Is Fargo Savings Account	\$1,200.00		\$1,200.00	11 U.S.C. § 522(d)(5)
LIIIE	HOITI SCHEUUIE PAB. 17.2			100% of fair market value, up to any applicable statutory limit	
(Subj	you claiming a homestead exemption ject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cove No	3 years after that for ca	ases fi	•	,
	☐ Yes				

		Document F	Page 19 (of 61		
Fill in this in	formation to identify you	ır case:				
Debtor 1	Rosita Saez					
200101	First Name	Middle Name L	ast Name		-	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name L	ast Name			
United States	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY				
					-	
Case number	r <u> </u>					
(if known)						if this is an
					ameno	led filing
Official E	orm 106D					
			<u>-</u>			
Schedu	le D: Creditors	Who Have Claims Se	<u>ecured</u>	by Propert	У	12/15
	y the Additional Page, fill it o	If two married people are filing together, out, number the entries, and attach it to t				
1. Do any credi	tors have claims secured by	your property?				
☐ No. CI	neck this box and submit the	his form to the court with your other scl	hedules. You	have nothing else t	to report on this form.	
■ Vec F	fill in all of the information	helow		· ·	•	
		Delow.				
Part 1: Lis	st All Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the creditons in a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.	rait 2. As	Do not deduct the	that supports this	portion
0.4 Camita	l One/ Kawasaki	Describe the meananty that accounce the	alaim.	value of collateral.	claim	If any
2.1 Capita Creditor's	l One/ Kawasaki	Describe the property that secures the 2013 Kawasaki KLX250	Ciaim:	\$3,425.00	\$2,675.00	\$750.00
Salt La	x 30253 ake City, UT 84130 Street, City, State & Zip Code	Sons Motorcycle. He pays and maintains vehicle. As of the date you file, the claim is: Cheapply. Contingent Unliquidated Disputed				
wno owes tn	e debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 or	•		rtgage or secure	ed		
Debtor 2 on	•	,				
_	nd Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
	e of the debtors and another	☐ Judgment lien from a lawsuit				
Check if th	is claim relates to a	Other (including a right to offset)				
	•					
Date debt was	incurred	Last 4 digits of account number				
	Fargo Home	Describe the property that secures the	alaimı	\$238,258.00	\$247,000.00	\$0.00
Morga Creditor's		151 Betsy Ross Way Woodbur		Ψ200,200.00	ΨΞ+7,000.00	Ψ0.00
G. Galler G	. Tallio	08096 Gloucester County	y, NJ			
PO Bo	x 10335					
	oines, IA	As of the date you file, the claim is: Che apply.	eck all that			
50306-	0335	☐ Contingent				
Number, S	Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes th	e debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 or	nly	☐ An agreement you made (such as mor	rtgage or secure	ed		
Debtor 2 on	ıly	car loan)				
	nd Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
☐ At least one	e of the debtors and another	☐ Judgment lien from a lawsuit				
	is claim relates to a	Other (including a right to offset)				
communit	y debt					
Date debt was	incurred	Last 4 digits of account number	1630			

Official Form 106D

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Debtor 1 Rosita Saez		Case number (if know)			
First Name Middle I	Name Last Name	_			
2.3 Westgate Resorts	Describe the property that secures the claim:	Unknown	Unknown	Unknown	
Creditor's Name 2801 Old Winter Garden Rd Ocoee, FL 34761	Westgate resorts 2801 Old Winter Garden Rd Ocoee, FL 34761 Orange County Debtor is surrendering any interest in the property As of the date you file, the claim is: Check all that apply. □ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or secar loan)	cured			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number				
			_		
Add the dollar value of your entries in	Column A on this page. Write that number here:	\$241,683.00)		
If this is the last page of your form, add Write that number here:	d the dollar value totals from all pages.	\$241,683.00)		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Ousc	7 10 21224 011	D00 1	Document	Page 21 of 6	61	00.01	oo wan
Fill i	n this infor	mation to identify your	case:					
Debt	tor 1	Rosita Saez						
		First Name	Middle	Name	Last Name			
Debt								
(Spou	se if, filing)	First Name	Middle	Name	Last Name			
Unite	ed States Ba	ankruptcy Court for the:	DISTRICT	OF NEW JERSEY				
Case	e number							
(if kno	own)						_	ck if this is an ended filing
Be as any ex Sched eft. A name Part 1. [complete an xecutory condule G: Executule D: Credit ttach the Cor and case nur List A Co any credit No. Go to F	m 106E/F E/F: Creditors W d accurate as possible. Us tracts or unexpired leases utory Contracts and Unexp tors Who Have Claims Sec ntinuation Page to this pag mber (if known). III of Your PRIORITY Ur ors have priority unsecure Part 2.	se Part 1 for or that could re bired Leases ured by Prop ge. If you hav asecured Cl ad claims aga	ereditors with PRIORIT sult in a claim. Also li (Official Form 106G). Dierty. If more space is in a no information to repairs. aims inst you?	Y claims and Part 2 for ist executory contract to not include any cre needed, copy the Part port in a Part, do not f	ts on Schedule A/B: F ditors with partially s you need, fill it out, ile that Part. On the t	Property (Official F lecured claims tha number the entrie op of any addition	Form 106A/B) and on at are listed in s in the boxes on the nal pages, write your
i F	dentify what ty possible, list th	priority unsecured claims pe of claim it is. If a claim hat e claims in alphabetical order than one creditor holds a pa	as both priority er according to	/ and nonpriority amount the creditor's name. If	ts, list that claim here a you have more than tw	nd show both priority a	nd nonpriority amo	ounts. As much as
(For an explan	ation of each type of claim,	see the instru	ctions for this form in the	instruction booklet.)	Total claim	Priority	Nonpriority
						Total Claim	amount	amount
2.1	IRS			Last 4 digits of accoun	nt number	\$36,866.26	\$36,866.2	26 \$0.00
	Priority Cr	reditor's Name		When was the debt in	curred?			
		field, NJ 07081-0744		When was the debt in			-	
		Street City State Zlp Code		As of the date you file	, the claim is: Check a	all that apply		
	Who incurre	ed the debt? Check one.		☐ Contingent				
	Debtor 1	only		☐ Unliquidated				
	Debtor 2	only		☐ Disputed				
	Debtor 1 a	and Debtor 2 only		Type of PRIORITY uns	secured claim:			
	☐ At least or	ne of the debtors and another	er	☐ Domestic support of	oligations			
	_	this claim is for a commu		■ Taxes and certain of	ther debts you owe the	government		
		subject to offset?	,	☐ Claims for death or p	•	•		
	■ No	-		☐ Other. Specify				
	☐ Yes							_

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Debt	tor 1 Rosita Saez	Case number	(if know)		
2.2	State Of New Jersey	Last 4 digits of account number	\$392.00	\$0.00	\$392.00
	Priority Creditor's Name	When was the debt incurred?			
	P.O. Box 445 Department Of Treasury	when was the dept incurred?			
	Trenton, NJ 08695				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that ap	ply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	☐ Debtor 2 only	☐ Disputed			
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government	nent		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were in	ntoxicated		
	No	☐ Other. Specify			
	Yes	State taxes			
Part	2: List All of Your NONPRIORITY Unsecu	rod Claims			
	Oo any creditors have nonpriority unsecured claim				
_	_	•			
L	\square No. You have nothing to report in this part. Submit	this form to the court with your other schedules.			
	Yes.				
4. L	ist all of your nonpriority unsecured claims in the	alphabetical order of the creditor who holds each cla	im. If a creditor has more	than one nonp	riority
		aim. For each claim listed, identify what type of claim it is. creditors in Part 3.lf you have more than three nonpriority			
	Part 2.	orealists in real can you have more than three nonphone	discoured claims in out	the continuation	ni i ago oi
	_			Total cla	im
4.1	Capital One Bank	Last 4 digits of account number 0583			\$1,100.00
	Nonpriority Creditor's Name		_		
	P.O. Box 30281 Salt Lake City, UT 84130	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that	apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community				
	debt	Obligations arising out of a separation agreemen	t or divorce that you did n	not	
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and oth	er similar debts		
	☐ Yes	Other. Specify Consumer debt			

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Debi	or 1 Rosita Saez	Case number (if know)	
4.2	Capital One Bank	Last 4 digits of account number 5489	\$3,164.00
	Nonpriority Creditor's Name P.O. Box 30281	When was the debt incurred?	
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, ,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Consumer debt	
4.3	Capital One Bank	Last 4 digits of account number 3441	\$1,617.00
	Nonpriority Creditor's Name	When we the debt in some 10	
	P.O. Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Consumer debt	
4.4	Chase	Last 4 digits of account number	\$6,305.00
	Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19886-5153	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Consumer debt	

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Deb	for 1 Rosita Saez	Case number (if know)	
4.5	Comenity Bank / Lane Bryant Nonpriority Creditor's Name	Last 4 digits of account number	\$1,149.00
	PO Box 182789 Columbus, OH 43218	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Consumer debt	
	1		
4.6	Comenity Bank / New York & Co	Last 4 digits of account number	\$2,053.00
	Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218-2789	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Consumer debt	
4.7	Credit First National Assocaition	Last 4 digits of account number 9296	\$894.00
	Nonpriority Creditor's Name PO Box 81344	When was the debt incurred?	
	Attn: Auto Pass		
	Cleveland, OH 44188		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Consumer debt	
			

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or 1 Rosita Saez	Case number (if know)	
Discover	Last 4 digits of account number	\$7,107.00
Nonpriority Creditor's Name PO Box 15251	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
_		
<u> </u>		
•	•	
At least one of the debtors and another	· ·	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
<u> </u>	<u></u>	
☐ Yes	Other. Specify Consumer debt	
Kohls	Last 4 digits of account number	\$742.00
PO Box 3115	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	_	
	·	
	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Consumer debt	
Lowe's	Last 4 digits of account number 1753	\$456.00
Nonpriority Creditor's Name Po Box 965005	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Consumer debt	
	Discover Nonpriority Creditor's Name PO Box 15251 Wilmington, DE 19886-5251 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Kohls Nonpriority Creditor's Name PO Box 3115 Milwaukee, WI 53201 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Lowe's Nonpriority Creditor's Name Po Box 965005 Orlando, FL 32896 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Discover Nicorpointy Creditor's Name PO Box 15251 Wilmington, DE 19886-5251 Number Street City State 2 pc Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Al least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt is the cl

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Deb	tor i Rosita Saez	Case number (if know)	
4.1 1	Macys	Last 4 digits of account number	\$1,136.00
	Nonpriority Creditor's Name P.O. Box 8218	When was the debt incurred?	. ,
	Mason, OH 45040 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify Consumer debt	
4.1	Sears	Last 4 digits of account number 7493	\$4,335.00
	Nonpriority Creditor's Name	 -	
	PO Box 6497	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the olam is. Shook an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Consumer debt	
4.1	Sears	Last 4 digits of account number 7119	\$4,020.00
<u> </u>	Nonpriority Creditor's Name		· ·
	PO Box 6497	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the damnis. Oneon all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ 162	Other. Specify Consumer debt	

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Debt	or 1 Rosita Saez	Case number (if know)	
4.1 4	Sears	Last 4 digits of account number 6810	\$2,134.00
	Nonpriority Creditor's Name PO Box 6497	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dain is. Oneok all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Consumer debt	
4.1 5	The Home Depot	Last 4 digits of account number 9117	\$3,227.00
J	Nonpriority Creditor's Name		. ,
	PO Box 6497	When was the debt incurred?	
	Sioux Falls, SD 57117-6497 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Consumer debt	
4.1 6	Wells Fargo Card Service	Last 4 digits of account number 3650	\$3,284.00
	Nonpriority Creditor's Name PO Box 14517	When was the debt incurred?	
	Des Moines, IA 50306-3517 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Consumer debt	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Rosita Saez		Case number (if know)
IRS PO Box 725 Special Procedures Function Springfield, NJ 7081	Line 2.1 of (<i>Check one</i>): Last 4 digits of account number	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
	<u> </u>	
Name and Address Irs	On which entry in Part 1 or Part Line 2.1 of (<i>Check one</i>):	2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims
P.O. Box 7346	<u>===</u> e. (e.1ee.t e.1e).	■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Philadelphia, PA 19101	Last 4 digits of account number	☐ Fait 2. Creditors with Nortphority Offsecured Claims
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?
IRS	Line 2.1 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims
1601 Market St Philadelphia, PA 19103		☐ Part 2: Creditors with Nonpriority Unsecured Claims
rilladelpilla, PA 19103	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?
State Of New Jersey	Line 2.2 of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims
P.O. Box 245		☐ Part 2: Creditors with Nonpriority Unsecured Claims
Dept Of Treasury-Division Of Taxation		
Trenton, NJ 08695-0245		
	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 37,258.26
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 37,258.26
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 42,723.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 42,723.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Rosita Saez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY	,	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Nissan-Infiniti Po Box 660366 Dallas, TX 75266	2014 Nissan Sentra.

		Docume	nt Page 30 o	<u>f 61</u>
Fill in this	information to identify your	case:		
Debtor 1	Rosita Saez			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filin	ng) First Name	Middle Name	Last Name	
	o,			
United Stat	tes Bankruptcy Court for the:	DISTRICT OF NEW JER	RSEY	
Case numb	per			
(if known)				☐ Check if this is an
				amended filing
Official	Form 106H			
		obtoro		
Schea	ule H: Your Cod	eptors		12/15
ill it out, ar rour name		boxes on the left. Attach). Answer every question.	the Additional Page to	on. If more space is needed, copy the Additional Page, or this page. On the top of any Additional Pages, write as a codebtor.
_	,	, , , ,	·	
■ No				
☐ Yes				
	nin the last 8 years, have you a, California, Idaho, Louisiana			(Community property states and territories include ngton, and Wisconsin.)
■ No.	Go to line 3.			
☐ Yes	. Did your spouse, former spo	use, or legal equivalent live	with you at the time?	
in line Form ′	2 again as a codebtor only	if that person is a guarant	or or cosigner. Make s	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 6G). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
<u>-</u>	Number Street			_

State

City

ZIP Code

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Fill	in this information	to identify your ca	ase:								
Del	btor 1	Rosita Saez				_					
	btor 2 ouse, if filing)					_					
Uni	ited States Bankru	otcy Court for the	DISTRICT OF NEW J	ERSEY		_					
_	se number						□ A		d filing ent showin	g postpetition ollowing date:	chapter
0	fficial Form	<u> 1061</u>					N	1M / DD/ Y	YYY		
S	chedule I:	Your Inco	ome								12/15
sup spo atta	plying correct infouse. If you are seach a separate she	ormation. If you parated and you	sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and you th you, do not inc	ur spouse i clude inforr	s livi natio	ng with on abou	you, inclu your spo	ude inforn ouse. If mo	nation about ore space is	your needed,
1.	Fill in your emp information.	loyment		Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more		Employment status	■ Employed				☐ Employed			
	attach a separate information about	, ,	Employment status	☐ Not employed	d			☐ Not e	mployed		
	employers.		Occupation	Hr director							
	Include part-time self-employed we		Employer's name	On Time Staff	ing						
	Occupation may or homemaker, it		Employer's address	535 Route 38 Cherry Tree C Cherry Hill, N	orporate		_				
			How long employed the	nere? 2 yea	ırs						
Pai	rt 2: Give De	etails About Mor	athly Income				_				
Esti spoi	imate monthly incuse unless you are	ome as of the da separated.	ate you file this form. If you		·			that perso	n on the li	·	J
2.			ry, and commissions (be calculate what the monthle		2.	\$	7	,916.70	\$	N/A	
3.	Estimate and lis	st monthly overti	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	7,9	16.70	\$	N/A	

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Deb	otor 1	Rosita Saez			Case	number (if k	nown)				
	Con	av line 4 hore	4.		For	Debtor 1	c 70		or Debtor on-filing s	spouse	
		y line 4 here	4.		Φ_	7,910	0.70	Φ		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$_	2,05		\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$_		0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	50		\$_		6.67	\$		N/A	
	5d.	Required repayments of retirement fund loans	50		\$_		0.00	\$		N/A	_
	5e. 5f.	Insurance Domestic support obligations	5e 5f		\$_ \$		1.52	\$ \$		N/A	
	5g.	Union dues			\$ _		0.00	Ф \$		N/A	
	5y. 5h.	Other deductions. Specify:	5g 5h	ا. ۲.+	\$ _		0.00 0.00			N/A	
^			_		· —						
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _	2,450		\$		N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	5,460	0.00	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88		\$_		0.00	\$		N/A	
	8b.	Interest and dividends	8b	Ο.	\$		0.00	\$		N/A	<u>\</u>
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c 8c		\$_ \$		0.00 0.00	\$		N/A	
	8e.	Social Security	86	€.	\$_		0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f		\$_ \$_		0.00	\$		N/A	
	8g. 8h.	Other monthly income. Specify:	8g 8h	J. ۱.+	\$ _	2,76	0.00	\$ + \$		N/A	
	011.		_ "			'	0.00	- Ψ		11/	<u>`</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	2,76	1.00	\$		N/	' A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		8,221.00	+ \$		N/A	= \$	8,221.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-		0,221100			1471		0,221100
11.	State Inches other	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe			•			n Schedul	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certainies								\$	8,221.00
13.	Do :	you expect an increase or decrease within the year after you file this form? No.	?							Comb	ined ily income
	_	Voc. Evoloin:									

Official Form 106I Schedule I: Your Income page 2

Fill in	n this informa	ition to identify yo	our case:			1		
Debto		Rosita Saez				Check	c if this is:	
Debto	or 2 use, if filing)							ving postpetition chapter the following date:
Unite	d States Bankı	ruptcy Court for the	: DISTRI	CT OF NEW JERSEY		_	MM / DD / YYYY	
Case (If kno	number own)							
Off	ficial Fo	rm 106J						
		J: Your						12/15
infor	rmation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Part	1: Desci	ribe Your House	hold					
	■ No. Go to □ Yes. Doe	o line 2. es Debtor 2 live	·	ate household? al Form 106J-2, <i>Expens</i> es	for Separate House	ehold of Debto	or 2.	
2.		e dependents?	■ No	, ,	,			
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
	expenses o	penses include f people other t d your depende	han $_{m \Box}$	No Yes				☐ Yes
expe	mate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the v		h assistance an		government assistance i luded it on <i>Schedule I:</i>)			Your exp	enses
4.		or home owners		ses for your residence. I r lot.	nclude first mortgag	e 4. \$		2,250.00
	If not include	led in line 4:						
		estate taxes				4a. \$		0.00
	•	rty, homeowner's	-	's insurance ipkeep expenses		4b. \$ 4c. \$		0.00
		owner's associat				4d. \$		100.00 0.00
5.				our residence, such as ho	me equity loans	5. \$	-	0.00

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Debtor 1	Rosita Saez	Case num	ber (if known)	
6. Uti l	ities:			
6. U til	Electricity, heat, natural gas	6a.	\$	175.00
6b.	Water, sewer, garbage collection	6b.	\$	80.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	180.00
6d.	Other. Specify: cell phone	6d.	·	130.00
ou.	Gas/Propane		\$	100.00
. Foo	od and housekeeping supplies		\$	
	Idcare and children's education costs	7. 8.	\$	300.00 0.00
_		9.	\$ 	
	thing, laundry, and dry cleaning sonal care products and services	9. 10.	\$	100.00
	dical and dental expenses			60.00
	•	11.	\$	50.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$	200.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	aritable contributions and religious donations	14.	\$	50.00
	urance.		<u> </u>	30.00
-	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.	\$	0.00
15b	o. Health insurance	15b.	\$	0.00
150	:. Vehicle insurance	15c.	\$	200.00
150	I. Other insurance. Specify:	15d.	\$	0.00
	res. Do not include taxes deducted from your pay or included in lines 4 or 20.		· 	
_	ecify:	16.	\$	0.00
	tallment or lease payments:			
17a	. Car payments for Vehicle 1	17a.	\$	350.00
17b	car payments for Vehicle 2	17b.	\$	0.00
17c	c. Other. Specify:	17c.	\$	0.00
17c	I. Other. Specify:	17d.	\$	0.00
8. Yo ı	ur payments of alimony, maintenance, and support that you did not report as	<u> </u>	_	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.	_	
	ner real property expenses not included in lines 4 or 5 of this form or on Sch			2.22
	. Mortgages on other property	20a.		0.00
	. Real estate taxes	20b.	·	0.00
	. Property, homeowner's, or renter's insurance	20c.	·	0.00
	I. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	e. Homeowner's association or condominium dues	20e.	·	0.00
1. Oth	ner: Specify:	21.	+\$	0.00
2 Cal	culate your monthly expenses			
	a. Add lines 4 through 21.		\$	4.375.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	4,373.00
				4 075 00
220	a. Add line 22a and 22b. The result is your monthly expenses.		\$	4,375.00
3. Cal	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8,221.00
	Copy your monthly expenses from line 22c above.	23b.	· -	4,375.00
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
230	Subtract your monthly expenses from your monthly income.			2.040.00
	The result is your monthly net income.	23c.	\$	3,846.00
For	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage? No.			e or decrease because of a
	Yes. Explain here:			

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Fill in this info	rmation to identify your	case:			
Debtor 1	Rosita Saez				
	First Name	Middle Name	Last Name		
Debtor 2	Fig. (N	ARTH M	I de la companya de l		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number					
(if known)				☐ Check if this is amended filing	
	m 106Dec				
Declara	ition About a	an Individual De	ebtor's Sched	ules	12/15
Sig	gn Below				
Did you p	ay or agree to pay some	eone who is NOT an attorney to	help you fill out bankrupto	cy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition Preparer's Declaration, and Signature (Official F	
	nalty of perjury, I declare are true and correct.	that I have read the summary	and schedules filed with th	is declaration and	
that they a		that I have read the summary	and schedules filed with th	is declaration and	
that they a X /s/ Ro Rosit	are true and correct.	that I have read the summary			

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		nation to identify you	r case:			
Debto	or 1	Rosita Saez First Name	Middle Name	Last Name		
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Ba	nkruptcy Court for the:	DISTRICT OF NEW JERS	SEY		
Case number(if known)					_	Check if this is an mended filing
Stat Be as inform	complete a	nd accurate as possi	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup v additional pages, write you	
Part '		,	rital Status and Where You	Lived Before		
1. V	What is your current marital status?					
	☐ Married ■ Not mar	ried				
2. D	During the last 3 years, have you lived anywhere other than where you live now?					
	 No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. 					
ı	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	and territori ■ No	es include Arizona, Ca		vada, New Mexico, Puerto Ri	ity property state or territory co, Texas, Washington and W	
Part 2	2 Explai	n the Sources of You	r Income			
F	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.					
•		in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$36,424.67	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Page 37 of 61 Case number (if known) Debtor 1 Rosita Saez

				Debtor 1 Sources of income	Gros	s income	Debtor 2 Sources of inc	ome	Gross income
				Check all that apply.	(befo	re deductions and sions)	Check all that a		(before deductions and exclusions)
	or last calen anuary 1 to	dar year: December 3	1, 2015)	■ Wages, commissions, bonuses, tips		\$151,556.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
		dar year befo December 3		■ Wages, commissions, bonuses, tips		\$61,596.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
5.	Include include and other winnings. I	come regardle public benefit If you are filing	ess of wheth payments; g a joint cas e gross inco	e during this year or the tweer that income is taxable. Epensions; rental income; interest and you have income that the form each source separate.	xamples of erest; divident t you rece	of other income are a dends; money collec- ived together, list it	alimony; child supp cted from lawsuits; only once under De	royalties; an ebtor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each (befo	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
		1 of current iled for bank		Penison		\$13,000.00			
	or last calen anuary 1 to	dar year: December 3	1, 2015)	Pension		\$51,614.00			
		dar year befo December 3		Pension		\$65,207.00			
Pa	rt 3: List	Certain Pay	ments You	Made Before You Filed fo	r Bankrur	ntcv			
6.		Debtor 1's o	or Debtor 2' otor 1 nor D	s debts primarily consum lebtor 2 has primarily consum personal, family, or househ	er debts? sumer de	bts. Consumer deb	ts are defined in 11	U.S.C. § 10	01(8) as "incurred by an
		_ ~	0 days befo Go to line 7	re you filed for bankruptcy,	did you pa	ay any creditor a tota	al of \$6,425* or mo	re?	
		□ Yes	List below e	each creditor to whom you p editor. Do not include payme					
			not include	payments to an attorney for on 4/01/19 and every 3 year	this bank	ruptcy case.			•
	Yes.			r both have primarily cons			al of \$600 or more?	,	
		_	•) - In-				
			Go to line 7						
			include pay	each creditor to whom you p ments for domestic support this bankruptcy case.					
	Creditor's	s Name and	Address	Dates of paym	nent	Total amount	Amount you still owe	Was this	payment for

Case 16-21224-JNP Doc 1 Filed 06/09/16 Entered 06/09/16 09:50:37 Desc Main Page 38 of 61 Document Case number (if known) Debtor 1 Rosita Saez Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift.

Official Form 107

per person

Address:

Describe the gifts

Value

Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Dates you gave

the gifts

Case 16-21224-JNP Doc 1 Filed 06/09/16 Entered 06/09/16 09:50:37 Desc Main Page 39 of 61 Document Case number (if known) Debtor 1 Rosita Saez 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Seymour Wasserstrum \$540.00 205 Landis Ave Vineland, NJ 8360 \$25.00 **Abacus Credit Counseling** credit counseling 15760 Ventura Blvd Suite 700 Encina, CA 91436 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment transferred Address or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made

paid in exchange

Person's relationship to you

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Debtor 1 Rosita Saez

19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot No □ Yes. Fill in the details.		y property to a	a self-settle	d trust or similar device	e of which you are a	I
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer wa	as
Par	tt 8: List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and S	torage Unit	s		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No Yes. Fill in the details.	other financial accour	nts; certificates	s of deposit	•	•	
	Name of Financial Institution and	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last baland before closing transf	or
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes, Fill in the details.	ear before you filed for	bankruptcy, a	ny safe dep	oosit box or other depo	sitory for securities	,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit of ■ No □ Yes. Fill in the details.	r place other than your	home within 1	l year befor	e you filed for bankrup	itcy?	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	rt 9: Identify Property You Hold or Control f	or Someone Else					
23.	Do you hold or control any property that son for someone. No Yes. Fill in the details.	neone else owns? Inclu	ude any proper	rty you borr	rowed from, are storing	រុ for, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		Describe	the property	Valu	ue
	tt 10: Give Details About Environmental Info						

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Rosita Saez

24.	Has any governmental unit notified you that y	ou may be liable or potentially liable	under or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	ny release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admi	nistrative proceeding under any envi	ronmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Co	onnections to Any Business		
27.	Within 4 years before you filed for bankruptcy	y, did you own a business or have an	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compar	ny (LLC) or limited liability partnershi	p (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exec	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Pa	rt 12.		
	☐ Yes. Check all that apply above and fill in	n the details below for each business	•	
		Describe the nature of the business	Employer Identification number	
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security n	umber or ITIN.
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	/, did you give a financial statement t	o anyone about your business? Inclu	de all financial
	■ No			
	Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

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Case number (if known) Document Debtor 1 Rosita Saez Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Rosita Saez Signature of Debtor 2 Rosita Saez Signature of Debtor 1 Date Date June 9, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your case:
Debtor 1	Rosita Saez
Debtor 2 (Spouse, if filing)	
United States B	sankruptcy Court for the: District of New Jersey
Case number (if known)	

Check	as directed in lines 17 and 21:
	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

ŀ	art	1: Calculate Your Average Monthly Income							
	1.	What is your marital and filing status? Check one of	only.						
		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11							
	10 the	I in the average monthly income that you received from al 1(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the tot- buses own the same rental property, put the income from that	month peal by 6. F	eriod would fill in the re	be March 1 the sult. Do not incl	ough Aug ude any ir	ust 31. If the amo	ount of your monthly incon ore than once. For examp	ne varied during le, if both
						Colum Debto		Column B Debtor 2 or non-filing spouse	
		Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and c	ommissio	ons (before a	\$	7,916.70	\$	
		Alimony and maintenance payments. Do not includ Column B is filled in.	e paym	ents from	a spouse if	\$	0.00	\$	
		All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Include regular contributions from a s filled in. Do not include payments you listed on line 3.	rt. Includ old, your spouse	de regulai depende	contributions nts, parents,		0.00	\$	
		Net income from operating a business, profession, or farm	Debto	r 1					
		Gross receipts (before all deductions)	\$_	0.00					
		Ordinary and necessary operating expenses	- \$ _	0.00					
		Net monthly income from a business, profession, or fa	arm \$_	0.00	Copy here -	> \$	0.00	\$	
	6.	Net income from rental and other real property	Debto						
		Gross receipts (before all deductions)	\$_	0.00					
		Ordinary and necessary operating expenses	- \$ _	0.00					
		Net monthly income from rental or other real property	Φ.	0.00	Copy here -	> \$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

	_										
						Colum Debto			Column B Debtor 2 o	or	
7.	Inter	est, dividends, and royalties				\$	0.	.00	\$		
8.	Uner	nployment compensation				\$	0.	.00	\$		•
		ot enter the amount if you contend that the a ocial Security Act. Instead, list it here:		s a benefit ı	under						
	Fo	r you	\$ \$	0.00	<u> </u>						
		r your spouse			_						
	bene	ion or retirement income. Do not include a fit under the Social Security Act.	•			\$	2,761	.00	\$		
10.	Do n recei dome	me from all other sources not listed above to include any benefits received under the Source as a victim of a war crime, a crime againstic terrorism. If necessary, list other source below.	ocial Security Act on st humanity, or inte	r payments ernational or							
					_	\$	0.	.00	\$		-
					_	\$	0.	.00	\$		
		Total amounts from separate pages, if a	ny.		+	\$	0.	.00	\$		-
11.		ulate your total average monthly income. column. Then add the total for Column A to			1	0,677.7	70 +	\$		= \$_	10,677.70
12. 13.	Сору	Determine How to Measure Your Deductive your total average monthly income from ulate the marital adjustment. Check one:								\$	10,677.70
	_	You are not married. Fill in 0 below.									
		You are married and your spouse is filing wi	ith you. Fill in 0 belo	ow.							
		You are married and your spouse is not filin Fill in the amount of the income listed in line dependents, such as payment of the spouse	g with you. e 11, Column B, that	t was NOT r							
		Below, specify the basis for excluding this in	•	•						•	
		adjustments on a separate page.									
		If this adjustment does not apply, enter 0 be	low.		\$						
					\$						
				+	\$						
		Total			S		0.00	Cop	y here=>		0.00
14.	Υοι	ir current monthly income. Subtract line 1	3 from line 12.	L						\$	10,677.70
15.	Cal	culate your current monthly income for the	ne year. Follow the	se steps:							
			-								
	15a	. Copy line 14 here=>								\$	10,677.70
	15a	Copy line 14 here=> Multiply line 15a by 12 (the number of mo	onths in a year).							· —	10,677.70 12

Rosita Saez

Debtor 1

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Debt	or 1	Ros	sita Saez			Case number (if known)			
16	. Cal	culat	e the median family income that applies to y	you. Fol	low these st	eps:			_
	16a	Filli	n the state in which you live.		NJ				
	16b	Fill i	n the number of people in your household.		1				
			n the median family income for your state and	size of h				¢ 61,347.00	
		To f	ind a list of applicable median income amounts ructions for this form. This list may also be avai	s, go onl	ine using the	e link specified in the separate		Ψ	
17		_	the lines compare?						
	17a	. L	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N						r
	17b		Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	ulation					vy
Par	t 3:	C	alculate Your Commitment Period Under 11	U.S.C. §	§ 1325(b)(4)				
18.	Cop	у уо	ur total average monthly income from line 1	1.			\$	10,677.70	
19.	cont	end	he marital adjustment if it applies. If you are that calculating the commitment period under 1 income, copy the amount from line 13.	married	l, your spous	se is not filing with you, and you			
			e marital adjustment does not apply, fill in 0 on	line 19a	ı.		-\$	0.00	
	19b	Sub	stract line 19a from line 18.				\$	10,677.70	
20.	Cal	culat	e your current monthly income for the year.	Follow	these steps	:			
	20a	Cop	y line 19b					\$10,677.70	
		Mul	tiply by 12 (the number of months in a year).					x 12	
									1
	20b	The	result is your current monthly income for the ye	ear for t	his part of th	e form		\$ 128,132.40	
	20c.	Cop	y the median family income for your state and	size of h	nousehold fro	om line 16c		\$ 61,347.00	
	04		u de the lines command				L		ı
	21.	_	v do the lines compare?						
			Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	se order	ed by the co	ourt, on the top of page 1 of this form,	check box	3, The commitment	
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless oth	erwise orde	red by the court, on the top of page 1	of this form	n, check box 4, The	
Par	t 4:	Si	gn Below						
	By s	ignin	g here, under penalty of perjury I declare that t	the infor	mation on th	is statement and in any attachments i	s true and	correct.	
)	(/s/	Ros	sita Saez						
			Saez		_				
	•		re of Debtor 1 Ine 9, 2016						
	Dun		M/DD/YYYY						
	If yo	u ch	ecked 17a, do NOT fill out or file Form 122C-2.						

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in	this info	ormation to	to iden	tify you	r case:															
Debto	r 1	Rosita S	Saez																	
Debto	r 0																			
	ı ∠ se, if filin	g)																		
United	d States E	3 Bankruptcy	/ Court	for the:	District	of New Je	ersey													
Case (if kno	number wn)													heck	if this	is an	amend	led fili	ng	
Officia	l Form 1	22C-2																		
		13 Ca	lcu	latio	of Y	our l	Disp	osa	ıble l	nc	om	е							(04/16
		form, you v Period (Offi				ed copy	of Cha	apter 13	3 Statem	ent (of You	ur Curi	ent Mo	nthly	Income	e and	Calcula	ition o	f	
space	is neede	e and accu ed, attach a es, write ye	a sepa	rate she	et to this	s form, In	nclude	the line												ore
Part 1	: Ca	Iculate Yo	our Dec	ductions	from Yo	ur Incom	ne													
the	question	I Revenue ns in lines may also	s 6-15.	To find t	he IRS s	tandards	s, go oı	nline u	sing the											
ехр	enses if	expense am they are hig d do not de	gher th	an the s	andards.	Do not in	nclude a	any ope	erating ex	xpen:	ses tha	at you	subtract	ted fro	m incor					
If yo	our exper	nses differ f	from m	onth to r	nonth, en	iter the av	verage	expens	se.											
Not	e: Line n	umbers 1-4	4 are n	ot used i	n this forr	m. These	numbe	ers appl	y to infor	mati	ion req	quired b	y a sim	ilar for	m used	l in ch	apter 7	cases.		
5.	The nu	mber of pe	eople	used in	determin	ing your	deduc	ctions f	rom inc	ome										
	plus the	ne number of number of peo	of any a	dditiona	l depende											1				
Nat	ional Sta	andards		You mu	ist use the	e IRS Nat	tional S	Standar	ds to ans	swer	the qu	estions	s in lines	s 6-7.						
6.		clothing, a								ed in	line 5	and the	e IRS N	ationa	I	\$	S		570.	.00
7.	the doll people	pocket he ar amount who are 65 than this IR	for out 5 or old	-of-pock lerbeca	et health ouse older	care. The r people h	e numbe have a l	er of pe higher	ople is s IRS allov	plit ir vanc	nto two	categ	oriesp	eople	who are	e unde	er 65 an	d		

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Page 47 of 61 Document Rosita Saez Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 1 7c. Subtotal. Multiply line 7a by line 7b. 54.00 Copy here=> 54.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 130 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. Total. Add line 7c and line 7f 54.00 Copy total here=> \$ 54.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 524.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,363.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Wells Fargo Home Morgage** 2,250.00 Сору Repeat this amount 2,250.00 2.250.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=>

Explain why:

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

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Rosita Saez Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. □ 0. Go to line 14. 1. Go to line 12. \square 2 or more. Go to line 12 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 270.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard..... 471.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment -NONE-Repeat this Copy amount on **Total Average Monthly Payment** 0.00 0.00 here => Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 471.00 471.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Copy Repeat this here amount on line Total average monthly payment 0.00 33c. 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 173.00

not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Rosita Saez Case number (if known)

	er Necessary Expenses	In addition to the expense the following IRS categorie		listed above	, you are allowed your monthly expenses	for	
16.	self-employment taxes, so your pay for these taxes. H	cial security taxes, and Medi lowever, if you expect to rec rom the total monthly amour	icare taxes. ceive a tax r	You may ind efund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	2,456.00
17.	•	The total monthly payroll dec	ductions tha	at vour iob re	quires, such as retirement	· —	<u> </u>
	contributions, union dues,	and uniform costs.				\$	0.00
40				•	1(k) contributions or payroll savings.	Ψ	0.00
18.	filing together, include pay	ments that you make for you or life insurance on your dep	ur spouse's	term life insu	e insurance. If two married people are irance. I spouse's life insurance, or for any form	\$	0.00
19.		: The total monthly amount t h as spousal or child suppor			by the order of a court or		
	Do not include payments of	n past due obligations for sp	pousal or ch	ild support. `	You will list these obligations in line 35.	\$	0.00
20.	_	hly amount that you pay for	education t	hat is either	required:		
	as a condition for your j			and Paradon	arta a ta assartialita tanatarilan asanda a	¢.	0.00
	, , , ,	, , ,		•	ation is available for similar services.	\$	0.00
21.		or any elementary or second		-	sitting, daycare, nursery, and preschool.	\$	0.00
22.	that is required for the hea		ır depender	its and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		
	Payments for health insura	nce or health savings accou	unts should	be listed only	y in line 25.	\$	0.00
23.	for you and your depender phone service, to the exter income, if it is not reimburs Do not include payments for	ats, such as pagers, call wait at necessary for your health led by your employer. Or basic home telephone, int	ting, caller in and welfare ternet and c	dentification, or that of you	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment		0.00
	expenses, such as mose in	eported on line 5 of Official I	Form 122C-	1, or any am	ount you previously deducted.	+\$	0.00
24.	Add all of the expenses a	eported on line 5 of Official R		•	ount you previously deducted.	** 	4,518.00
	•	allowed under the IRS expo	ense allow	ances.	ne Means Test.		
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disabil	ns These are additional Note: Do not include ity insurance, and health s	ense allow deductions any expens savings acc	ances. allowed by the allowances	ne Means Test.	\$	
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disabil insurance, disability insurance	ns These are additional Note: Do not include ity insurance, and health s	ense allow deductions any expens savings acc	ances. allowed by the allowances	ne Means Test. s listed in lines 6-24. ses. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disabilinsurance, disability insura your dependents.	ns These are additional Note: Do not include ity insurance, and health s	deductions any expens	ances. allowed by the allowances count expendere reasonab	ne Means Test. s listed in lines 6-24. ses. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disabilinsurance, disability insura your dependents. Health insurance	These are additional Note: Do not include a nce, and health savings acc	deductions any expens savings accounts that a	ances. allowed by the allowances count expense reasonab 0.00	ne Means Test. s listed in lines 6-24. ses. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23. litional Expense Deduction Health insurance, disabil insurance, disability insura your dependents. Health insurance Disability insurance	These are additional Note: Do not include a nce, and health savings acc	deductions any expens savings accounts that a	ances. allowed by the allowances count expenser reasonab 0.00 0.00	ne Means Test. s listed in lines 6-24. ses. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	ns These are additional Note: Do not include ity insurance, and health since, and health savings acc	deductions any expense savings accounts that a	ances. allowed by the allowances count expense reasonab 0.00 0.00 0.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health Iy necessary for yourself, your spouse, o	\$r	4,518.00
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	ns These are additional Note: Do not include ity insurance, and health since, and health savings according total amount?	deductions any expense savings accounts that a	ances. allowed by the allowances count expense reasonab 0.00 0.00 0.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health Iy necessary for yourself, your spouse, o	\$r	4,518.00
Add 25.	Add all of the expenses a Add lines 6 through 23. iitional Expense Deduction Health insurance, disability insurance, disability insurance disability insurance disability insurance. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do yes Continued contributions continue to pay for the reasyour household or member	These are additional Note: Do not include ity insurance, and health savings according amount? You actually spend?	deductions any expens savings accounts that a summer shall be savings account to the savings accounts the savings accounts that a summer shall be savings accounts the savings a	ances. allowed by the ellowances count expenser reasonabe 0.00	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health ly necessary for yourself, your spouse, o Copy total here=> e actual monthly expenses that you will ly, chronically ill, or disabled member of such expenses. These expenses may	\$r	4,518.00
25. 26.	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance, disability insurance disability insurance disability insurance. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do yes Continued contributions continue to pay for the reacy your household or member include contributions to an Protection against family	These are additional Note: Do not include ity insurance, and health since, and health savings account total amount? You actually spend? to the care of household conable and necessary care of your immediate family waccount of a qualified ABLE violence. The reasonably in the same included in the same i	deductions any expens savings accounts that a support of family me and support of is unable program. 2 necessary responses a support of the s	ances. allowed by the allowances count expenser reasonabe 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health ly necessary for yourself, your spouse, o Copy total here=> e actual monthly expenses that you will ly, chronically ill, or disabled member of such expenses. These expenses may	\$r	0.00

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btor 1	Rosita Saez	Case number (if known)					
	Additional home energy costs. Your hom ine 8.	ne energy costs are included in your insurance and ope	erating	expense	s on			
	f you believe that you have home energy c B, then fill in the excess amount of home er	osts that are more than the home energy costs include nergy costs	ed in ex	penses	on line	•		
	You must give your case trustee documenta amount claimed is reasonable and necessa	ation of your actual expenses, and you must show tha	t the ad	ditional		\$		0.0
9	Education expenses for dependent child 5160.42* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The monthly expense ependent children who are younger than 18 years old to	es (not r o attend	nore tha	in ite or			
	ou must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain won already accounted for in lines 6-23.	hy the	amount				
*	Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or after the d	ate of a	djustme	nt.	\$		0.0
ł		he monthly amount by which your actual food and clot g allowances in the IRS National Standards. That amous s in the IRS National Standards.						
		ional allowance, go online using the link specified in the bankruptcy clerk's office.	ne sepa	rate				
`	ou must show that the additional amount	claimed is reasonable and necessary.				\$		0.0
	Continuing charitable contributions. The nstruments to a religious or charitable orga	e amount that you will continue to contribute in the forminization. 11 U.S.C. § 548(d)(3) and (4).	n of cas	h or fina	incial			
[Do not include any amount more than 15%	of your gross monthly income.				\$		0.0
	Add all of the additional expense deduct	tions.				\$_	(0.00
Dedu	ctions for Debt Payment							
		in property that you own, including home mortgag 33a through 33e.	jes, vel	icle				
lo To	ans, and other secured debt, fill in lines	33a through 33e. ent, add all amounts that are contractually due to each						
lo To	ans, and other secured debt, fill in lines of calculate the total average monthly paym	33a through 33e. ent, add all amounts that are contractually due to each					age month	ly
lo To cr	ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba Mortgages on your home	33a through 33e. ent, add all amounts that are contractually due to each nkruptcy. Then divide by 60.	n secure	ed	=>	Avera paym	ent	
lo To cr	ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for ba Mortgages on your home Copy line 9b here	33a through 33e. ent, add all amounts that are contractually due to each	n secure	ed	=>		_	
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ebtor 1	Ros	ita Saez			Case	e number (if known)			
		debts that you listed in lir property necessary for yo				,			
	No.	Go to line 35.							
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill	ossession of your property						
Name	of the	creditor	Identify property that se	cures the deb	t	Total cure amount		Monthly o	cure
-NOI	NE-				\$		÷ 60 = \$		
					ſ		Сору		
					Total	\$	total	> \$	0.00
		owe any priority claims - s				at			
_	-	due as of the filing date of Go to line 36.	or your bankruptcy case	f 11 U.S.C. 9	507.				
		Fill in the total amount of a	all of these priority claims.	Do not includ	e current or				
		ongoing priority claims, su	ch as those you listed in I	ine 19.					
		Total amount of all past-	due priority claims			\$ 36,866.2	26 ÷ 60	\$	614.44
36. Pr	ojecte	d monthly Chapter 13 pla	n payment			\$	_		
Of the To	fice of Exec find a l	nultiplier for your district as the United States Courts (foutive Office for United State ist of district multipliers that incl instructions for this form. This lis	or districts in Alabama and es Trustees (for all other d udes your district, go online u	North Caroli istricts).	na) or by	X			
Av	erage	monthly administrative exp	ense			\$	Copy tot here=>		
		of the deductions for debes 33e through 36.	ot payment.					\$	2,864.44
Total I	Deduc	tions from Income							
38. A d	ld all d	of the allowed deductions							
		ne 24, All of the expenses a e allowances		. \$	4,518.00	-			
		ne 32, All of the additional e			0.00	_			
C	opy lir	ne 37, All of the deductions	for debt payment	+\$	2,864.44				
т	otal de	eductions		\$	7.382.44	Conv total here		¢	7.382.44

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Debtor 1	Rosita Sa	Z				Case	numl	oer (if known)			
Part 2:	Determin	You	ur Disposable Income Under 11 U.	S.C. § 13	25(b)(2)					
			rent monthly income from line 14 Current Monthly Income and Calc						\$_		10,677.70
ch i dis rec	ildren. The nability paymeseived in acco	onth nts f rdan	oly necessary income you receive ally average of any child support payn or a dependent child, reported in Par ace with applicable nonbankruptcy la- ended for such child.	nents, fos	ster c m 12	are payments, or 2C-1, that you	\$	0	.00		
em in 1	ployer withhous 11 U.S.C. § 5	ld fro 41(b)	etirement deductions. The monthly om wages as contributions for qualification (7) plus all required repayments of loc. § 362(b)(19).	ed retiren	nent	plans, as specified	\$	0	.00		
42. To t	tal of all ded	uctio	ons allowed under 11 U.S.C. § 707	b)(2)(A).	Cop	y line 38 here=>	\$	7,382	.44		
exp the	penses and yeir expenses.	ou ha You	ial circumstances. If special circum ave no reasonable alternative, descr must give your case trustee a detailed ocumentation for the expenses.	ibe the sp	eciá	I circumstances and					
Descri	be the spec	al ci	rcumstances			Amount of expen	se				
						\$					
						\$ \$					
					_						
				Total	\$_	0.00	Co _l her	oy e=> \$ 		0.00	
44. To t	tal adjustme	nts.	Add lines 40 through 43.			=> \$		7,382.44	Cop	oy ==> - \$	7,382.44
45. Ca Part 3:	1		othly disposable income under § 1	325(b)(2)	. Suk	otract line 44 from lin	e 39	Э.		\$	3,295.26
46. Ch hav tim you	ange in inco ve changed o le your case u filed your p	me or r are vill be	or expenses. If the income in Form a virtually certain to change after the e open, fill in the information below. In, check 122C-1 in the first column, a in when the increase occurred, and	date you for examenter line	filed ple, i 2 in t	your bankruptcy peti f the wages reported the second column, e	tion I inc	and during the reased after			
Form	Line		Reason for change			Date of change		Increase or decrease?	An	nount of chang	е
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1 C-2 C-1 C-1							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Decrease ☐ Decrease	\$ \$		
□ 1220						_	_	■ Decrease	\$		

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Deptor 1	ROSITA SAEZ	Case number (If known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the inf	formation on this statement and in any attachments is true and correct.
-	/s/ Rosita Saez Rosita Saez Signature of Debtor 1	
	June 9, 2016 MM / DD / YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-21224-JNP Doc 1 Filed 06/09/16 Entered 06/09/16 09:50:37 Desc Main Document Page 58 of 61

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtDistrict of New Jersey

In re	Rosita Saez		Case No.						
		Debtor(s)	Chapter	13					
	DISCLOSURE OF COMPEN	SATION OF ATTOR	RNEY FOR DE	CBTOR(S)					
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:								
	For legal services, I have agreed to accept		\$	3,500.00					
	Prior to the filing of this statement I have received		\$	540.00					
	Balance Due			2,960.00					
2.	The source of the compensation paid to me was:								
	■ Debtor □ Other (specify):								
3.	The source of compensation to be paid to me is:								
	■ Debtor □ Other (specify):								
4.	■ I have not agreed to share the above-disclosed compe	nsation with any other person	unless they are mem	pers and associates of my law	/ firm.				
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name				. A				
5.	n return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
	a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed]								
	Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ns as needed; preparation	emption planning; and filing of moti	preparation and filing of ons pursuant to 11 USC	İ				
5.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			es, relief from stay action	ns or				
		CERTIFICATION							
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s)	in				
J	une 9, 2016	/s/ John Amenha							
Date		John Amenhause Signature of Attorne		014 New Jersey					
		Law Offices of Se	ymour Wasserstr	um					
		205 W Landis Ave Vineland, NJ 0830							
		856-696-8300 Fa	x: 856-696-3586						
		mylawyer7@aol.c	com						
		riame oj iaw jirm							

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United States Bankruptcy Court District of New Jersey

In re	Rosita Saez		Case No.				
		Debtor(s)	Chapter	13			
VERIFICATION OF CREDITOR MATRIX							
The abo	ove-named Debtor hereb	by verifies that the attached list of creditors is true and corre	ect to the best	of his/her knowledge.			
Date:	June 9, 2016	/s/ Rosita Saez					

Rosita Saez Signature of Debtor Capital One Bank P.O. Box 30281 Salt Lake City, UT 84130

Capital One/ Kawasaki PO Box 30253 Salt Lake City, UT 84130

Chase P.O. Box 15298 Wilmington, DE 19886-5153

Comenity Bank / Lane Bryant PO Box 182789 Columbus, OH 43218

Comenity Bank / New York & Co PO Box 182789 Columbus, OH 43218-2789

Credit First National Assocaition PO Box 81344 Attn: Auto Pass Cleveland, OH 44188

Discover PO Box 15251 Wilmington, DE 19886-5251

IRS PO Box 744 Springfield, NJ 07081-0744

IRS
PO Box 725
Special Procedures Function
Springfield, NJ 7081

IRS 1601 Market St Philadelphia, PA 19103

Irs
P.O. Box 7346
Philadelphia, PA 19101

Kohls PO Box 3115 Milwaukee, WI 53201

Lowe's Po Box 965005 Orlando, FL 32896

Macys P.O. Box 8218 Mason, OH 45040

Nissan-Infiniti Po Box 660366 Dallas, TX 75266

Sears PO Box 6497 Sioux Falls, SD 57117

State Of New Jersey P.O. Box 445 Department Of Treasury Trenton, NJ 08695

State Of New Jersey P.O. Box 245 Dept Of Treasury-Division Of Taxation Trenton, NJ 08695-0245

The Home Depot PO Box 6497 Sioux Falls, SD 57117-6497

Wells Fargo Card Service PO Box 14517 Des Moines, IA 50306-3517

Wells Fargo Home Morgage PO Box 10335 Des Moines, IA 50306-0335

Westgate Resorts 2801 Old Winter Garden Rd Ocoee, FL 34761